

# ALABAMA MANUFACTURED HOUSING COMMISSION

350 SOUTH DECATUR STREET  
MONTGOMERY, AL 36104  
PH(334) 242-4036 FAX(334) 240-3178  
WWW.AMHC.ALABAMA.GOV

## APPLICATION FOR LICENSE TO SELL OR LEASE MANUFACTURED HOMES

CHECK ONE    NEW \_\_\_\_\_    RENEWAL \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

NAME OF BUSINESS \_\_\_\_\_

DBA (DOING BUSINESS AS) \_\_\_\_\_

Name of Owner/President \_\_\_\_\_

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_    DL NO. \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

LOCATION ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

Pursuant to the provisions of "The code of Alabama 1975, §§24-4A-3, 24-6-4." I hereby submit this application and fee for license.

### Bond Surety Company

\_\_\_\_\_  
Surety Company

\_\_\_\_\_  
Surety Company Phone Number

\_\_\_\_\_  
Bond Amount

### General Liability Insurance Company

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Company Phone Number

\_\_\_\_\_  
Insurance Amount

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ Date \_\_\_\_\_

(PLEASE PRINT OR WRITE LEGIBLY)